



# Agricultural Development Service

Department of Agriculture

For official use only: Form AAF-18

Registration No. \_\_\_\_\_ Inspection Date: \_\_\_\_\_ Time: \_\_\_\_\_

## AGRICULTURAL ASSESSMENT FORM (AAF-18)

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Contact Number(s): \_\_\_\_\_

Email: \_\_\_\_\_ Social Security Number (Last 4-digits) / Claim Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Farm Location: \_\_\_\_\_ Lot #: \_\_\_\_\_ Water Meter#: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Sex: Male/Female/Other Citizenship: \_\_\_\_\_ Disability: Yes/No Veteran: Yes/No

### PURPOSE OF VISIT

☐ Agricultural Water Rate ☐ Bona Fide Certification ☐ Crop Compensation ☐ Re-Inspection/Inactive

### TYPE OF AGRICULTURAL VENTURE

☐ Aquaculture ☐ Crop Production ☐ Fruit Trees ☐ Hydroponic ☐ Livestock ☐ Nursery ☐ Poultry

### LAND OWNERSHIP

☐ Chamorro Land Trust land ☐ Private land ☐ Leasing land

### AGREEMENT:

*The applicant agrees to report to the Department of Agriculture within six (6) months and every six (6) months thereafter all such farming activities. Failure to do so will result in the TERMINATION of the assistance of Public Law 9-42.*

I CERTIFY THAT ALL THE INFORMATION AND STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

FARMER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

INSPECTED VERIFIED BY: \_\_\_\_\_ DATE: \_\_\_\_\_



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## MAP TO FARM

Draw a simple sketch to your property. Indicate and landmarks such as schools, road signs, churches etc.

*For inspector use only:*

☐ See Google Map



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**FARM LAYOUT**

Draw a simple sketch of your property. Indicate and label crops, storage areas, water bodies, fences, road, house.

**SAMPLE ONLY**

Field Numbers:

Field 1

Eggplant

Field 2

Peppers

Road: =====

House:

H

Water Meter: WM

Betel nut tree border: XXXXXXXXXXXX

Total acreage: \_\_\_\_\_

Acreage farmed: \_\_\_\_\_





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Revised: December 3, 2018



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\*\*\*\*\*FOR OFFICIAL USE ONLY\*\*\*\*\*

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